**CAOT OT SPD**

**MENTAL HEALTH FACT SHEET**

Sensory processing disorder (SPD) Impacts all areas of development. It is critical that all mental health clinicians understand the impact of SPD on mental health. Sensory processing disorder (SPD) can contribute to and exacerbate mental health challenges experienced by children and adults. SPD occurs when the nervous system does not efficiently register, orient to, modulate or integrate sensory input. It is a disorder experienced by children and adults, and is included in recognized classification systems (Zero to Three, ICDL). Studies reveal that 5-16% of typically developing school aged children experience some form of SPD. However, 35.7 % of children referred to a mental health clinic have underlying SPD (Jagerman & Klein, 2010). There is an association between SPD and both internalizing behaviours (anxiety, depression) and externalizing behaviours (aggression, non-compliance). There has been a relationship identified between sensory over-responsivity and social anxiety disorder (Hoffman and Britan, 2007) and adults with sensory over-responsivity report high levels of anxiety. Adults with sensory defensiveness reported significantly higher levels of anxiety compared with non-defensive adults (Kinnealy & Fuick, 1999, Pfeiffer & Kinnealey, 2003).There is also a correlation found between children and adults with oral and tactile over-responsivity and obsessive compulsive behaviours (Darr et al, 2012).

It is very important to understand sensory processing when working with children and adults who have experienced trauma. They can be hypervigilant and often exhibit dysregulated states of arousal. They often experience sensitivity to touch, sounds, movement and smells which can contribute to flight, fight, or freeze reactions (van der Kolk, 2005). Knowledge about the use of sensory motor input to calm the nervous system is critical in trauma treatment (Koomar et al, 2016, Ogden 2016).

The following examples describe how SPD can have a negative impact on mental health:

***Baby Suylaman*** is overwhelmed by tactile sensations and changes in head position. He becomes irritable when his mom tries to feed, bath or dress him. He is not soothed when he is cuddled. Mom has become increasingly frustrated and worried about her inability to comfort her son and complete self-care routines. She feels that he is rejecting her and she begins to become increasingly anxious about her parenting skills which decreases her attempts to comfort and interact with her child which is beginning to affect attachment.

***Three year old Charlie*** has just started day care. He has a history of sensitivity to sounds. He was always a light sleeper, startles with unexpected sounds and has an irrational fear of noise appliances. Charlie’s parents recognized this sensitivity and tried their best to avoid noisy family gatherings, busy parks and indoor playgrounds. The noise at day care cannot be controlled and Charlie has begun to exhibit aggression against his peers and caregivers. He primarily engages in solitary play and presents like a child with autism spectrum disorder.

***Anna is a high school student*** who is currently being home schooled. Her anxiety regarding sounds and smells in the classroom and cafeteria has led to extreme anxiety and school refusal. Her relationships with her peers have been affected and she is feeling isolated and is beginning to show signs of depression.

***Maria*** often takes sick leave from work due to her anxiety and depression. She has poor discrimination of vestibular input and therefore does not respond appropriately to gravitational demands or movement. This has resulted in poor spatial awareness and immature balance reactions. She does not feel safe at work as her she has difficulty walking on uneven surfaces and standing for extended periods. She often feels lost and not connected to her surroundings.

**SPD challenges can impact mental health by leading to the following:**

In babies you may observe:

* Lack of internal regulation and co-regulation
* Defensive responses to adult interaction
* Disrupted attachment
* Lack of initiation and the ability to sustain engagement
* Poor sleep, feeding patterns and hygiene routines
* Irritability and limited self-soothing behaviours

In children, you may observe:

* Separation anxiety
* School refusal
* Difficulty with social relationships
* Lack of flexibility and increased need to control
* Problems with disruption in routines and difficulties with transitions
* Limited attending behaviours
* Poor frustration tolerance and impulse control
* Hypervigilance
* Frequent fright-flight-fight-freeze
* Aggression
* Poor play skills
* Avoidance of self-care routines
* Struggles with academic performance

Adults may report:

* Struggles with intimacy and sexual and social relations
* Difficulties parenting
* Challenges with sensory features of the work environment
* Inflexible and difficulty collaborating with others
* Inconsistent attendance and performance at work

**What should I do if I suspect my child or my own mental health challenges may be affected by an underlying SPD?**

1. **Seek out an evaluation** with a registered Occupational Therapist who has experience with sensory processing disorders and mental health challenges (contact your provincial association of occupational therapists or the Canadian Association of Occupational Therapists (CAOT) to find an Occupational Therapist (OT) with specialized training). Request strategies and seek out therapy if indicated.
2. **Educate** yourself through websites, books, and workshops.